## Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for nple, your driver's	Kelley First name Michelle	First name
	license or passport).  Bring your picture identification to your meeting with the trustee.		Partak Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ade your married or		
3.	Only your num	the last 4 digits of social Security the rederal vidual Taxpayer tification number	xxx-xx-5130	
	(ITI)			

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Debtor 1 Kelley Michelle Partak

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs				
5.	Where you live	1045 East First Street	If Debtor 2 lives at a different address:				
		Coal City, IL 60416  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Grundy County	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Kelley Michelle Partak

Case number (if known)

ar	t 2: Tell the Court About	Your I	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7						
	choosing to file under							
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the fee yo	ck with the clerk's office in your local court fo ourself, you may pay with cash, cashier's ch alf, your attorney may pay with a credit card	eck, or money	
					stallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Indivi	duals to Pay	
			I request that but is not req that applies to	t my fee be wa uired to, waive o your family si	aived (You may request this option your fee, and may do so only if your are unable to pay the	n only if you are filing for Chapter 7. By law, our income is less than 150% of the official p fee in installments). If you choose this option Official Form 103B) and file it with your petit	ooverty line n, you must fill	
9.	Have you filed for bankruptcy within the	■ N						
	last 8 years?	ПΥ			140			
			District		When			
			District		When When	Case number		
			District		when	Case number		
10.	Are any bankruptcy	■ N	lo					
	cases pending or being filed by a spouse who is not filing this case with	ПΥ						
	you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.				
		ПΥ	es. Has yo	ur landlord obt	ained an eviction judgment agains	st you and do you want to stay in your reside	ence?	
				No. Go to line	12.			
				Yes. Fill out Ir bankruptcy pe		Judgment Against You (Form 101A) and file	e it with this	

Debtor 1 Kelley Michelle Partak

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Case number (if known)

Part	3: Report About Any Bus	sinesses \	ou Own	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code			
	it to this petition.		Check	the appropriate box	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	9			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriations. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement rations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process 1 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number Street City State 2 7in Code			
					Number, Street, City, State & Zip Code			

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Debtor 1 Kelley Michelle Partak

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor	2	(Spouse	Only	in a	a Joint	Case)
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You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing about	credit
counseling because of:		

I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 55 Case number (if known) **Kelley Michelle Partak** Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kelley Michelle Partak **Kelley Michelle Partak** Signature of Debtor 2 Signature of Debtor 1 Executed on January 19, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Kelley Michelle Partak Document Page 7 of 55

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	January 19, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Bar number & State		

		DOCUM	eni Paue 8 oi 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kelley Michelle P	artak		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	95,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,473.10
	1c. Copy line 63, Total of all property on Schedule A/B	\$	106,473.10
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	97,004.70
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,952.20
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,800.11
	Your total liabilities	\$	138,757.01
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,231.28
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,239.06
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
7.	What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a persona	ıl. fami

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,874.52 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,952.20
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s <u> </u>	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	2,952.20

	Ca	se 16-01575	Doc 1		01/19/16 ument	Entered 01/19/ Page 10 of 55	16 16:28:19	Des	sc M	lain	
-111	in this inforr	mation to identify yo	ur case and t								
Deb	tor 1	Kelley Michelle	Partak								
		First Name		e Name		Last Name					
	tor 2 use, if filing)	First Name	Middle	e Name		Last Name					
Jnite	ed States Ba	nkruptcy Court for the	e: NORTHER	KN DISTI	RICT OF ILLIN	NOIS					
Case	e number _					-				Check if this is an amended filing	
∕ŧŧ	icial Ea	rm 106A/B									
_		e A/B: Pro	nerty							12/15	
				n asset o	nly once If an	asset fits in more than one	category list the a	sset in the	cated		
	space is need	ed, attach a separate s	heet to this forn	n. On the	top of any addi	ing together, both are equal itional pages, write your nai n or Have an Interest In					
. Do	you own or h	ave any legal or equita	ble interest in a	ny reside:	nce, building, la	and, or similar property?					
П	No Code Dou			-	_						
_	No. Go to Part										
_	Yes. Where is	s tne property?									
1.1				What	is the property	? Check all that apply.					
		First Street			Single-family h	nome				exemptions. Put the	
	Street address,	address, if available, or other description			Duplex or mult	i-unit building			I claims on Schedule D: Claims Secured by Property.		
					Condominium	or cooperative					
						or mobile home			_		
	<b>Coal City</b>	IL 6	0416-0000		Land		Current value of entire property			ent value of the on you own?	
	City	State	ZIP Code		Investment pro	pperty	\$95,0	00.00		\$95,000.00	
					Timeshare						
					Other					nership interest	
				Who I	nas an interest	in the property? Check	(such as fee sir a life estate), if		incy by	the entireties, or	
				_	Debtor 1 only						
	Grundy			. 📙	Debtor 2 only						
	County				Debtor 1 and D	•	☐ Check if th		munity	property	
						the debtors and another	(see instru	ctions)			
					information yo rty identification	ou wish to add about this ite on number:	em, such as local				
				Valu Need sink pour	e =\$85,000 ds new roof ing- house	- \$95,000 based on o , house is on a slant needs to be lifted and	and needs new	found:			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$95,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Deb	or 1 Kelley Michelle Partak	Ca	se number (if known)	
3. <b>C</b> a	ars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
п	No			
•	Yes			
0.4	Make: Chevy	Who has an interest in the manualty Oheak are	Do not deduct secured cla	aims or exemptions. Put
3.1	LIUD	Who has an interest in the property? Check one.	the amount of any secure	
	Model: HHK Year: 2007	■ Debtor 1 only	Creditors Who Have Clair	
	Approximate mileage: 160,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another	onimo proporty :	portion you out
	Need Repair / Poor Condition			
	Value = \$1,000	☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
		(See Instructions)		
	Make: Nissan		Do not deduct secured cla	aims or exemptions. Put
3.2	Murana	Who has an interest in the property? Check one.	the amount of any secure	d claims on <i>Schedule D:</i>
	Wodel.	■ Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
	Year: 2004 Approximate mileage: 80,000	Debtor 2 only	Current value of the	Current value of the
	Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	(co-signed for daughter)	At least one of the deplots and another		
	Value = \$4,594 Per KBB Search	☐ Check if this is community property	\$4,594.00	\$4,594.00
	(1/11/16)	(see instructions)		
		n for all of your entries from Part 2, including ar that number here		\$5,594.00
Part :	Describe Your Personal and Household Ite	ome		
	ou own or have any legal or equitable in			Current value of the
DO ,	ou own or have any legal or equitable in	nerest in any or the following items:		portion you own? Do not deduct secured claims or exemptions.
	busehold goods and furnishings xamples: Major appliances, furniture, linens	s, china, kitchenware		
_	No			
	Yes. Describe			
	Bed, Dressor, C	Couch, Table		\$200.00
7. <b>E</b> l	ectronics			
Е	xamples: Televisions and radios; audio, vid including cell phones, cameras, n	eo, stereo, and digital equipment; computers, printe	rs, scanners; music collect	
г	No			ions; electronic devices
	Yes. Describe	nedia piayers, garries		ions; electronic devices
	Television (2), I	neula players, games		ions; electronic devices
	10101101011 (=), =			
	<u>'</u>			ions; electronic devices
თ. <b>ს</b> (	Alleetibles of value			
E	bllectibles of value xamples: Antiques and figurines; paintings,	_aptop	t objects; stamp, coin, or b	\$200.00
Е		_aptop prints, or other artwork; books, pictures, or other ar	t objects; stamp, coin, or b	\$200.00
_	xamples: Antiques and figurines; paintings,	_aptop prints, or other artwork; books, pictures, or other ar	t objects; stamp, coin, or b	\$200.00
_	xamples: Antiques and figurines; paintings, other collections, memorabilia, co.	_aptop prints, or other artwork; books, pictures, or other ar	t objects; stamp, coin, or b	\$200.00

Official Form 106A/B

Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Page 12 of 55 Document Case number (if known) Debtor 1 **Kelley Michelle Partak** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal Used Clothing of Debtor \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$800.00 for Part 3. Write that number here **Describe Your Financial Assets** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  $\square$  No Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Checking Account Standard Bank** Value = \$900 (highest in month after pay \$900.00 17 1 check deposited) 18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

Institution or issuer name: ☐ Yes.....

Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Document Page 13 of 55 Case number (if known) Debtor 1 **Kelley Michelle Partak** 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401 (K) Through Employer \$1,159.10 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them...

#### Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

### 28. Tax refunds owed to you

□ No

Yes. Give specific information about them, including whether you already filed the returns and the tax years......

2015 Projected Tax Refund

\$3,000.00

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

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	Case 16-01575	Doc 1	Filed 01/19/16		Desc Main
Debtor 1	Kelley Michelle Parta	ık	Document	Page 14 of 55 Case number (if known)	
☐ Yes.	Give specific information				
Examp ■ No	amounts someone owes poles: Unpaid wages, disabilibenefits; unpaid loans Give specific information	ity insurance you made to		nefits, sick pay, vacation pay, workers' compe	ensation, Social Security
	sts in insurance policies bles: Health, disability, or lif	e insurance;	health savings account	(HSA); credit, homeowner's, or renter's insura	ance
■ Yes.	Name the insurance compa	any of each p pany name:	policy and list its value.	Beneficiary:	Surrender or refund
		m Life Insu Cash Valu	rance Through Emp ie	loyer	value: Unknown
If you a some of the some of	Give specific information  s against third parties, wholes: Accidents, employments	ether or not nt disputes, ir	ct proceeds from a life in you have filed a lawsunsurance claims, or right	nsurance policy, or are currently entitled to rec	
35. <b>Any fin</b> ■ No	nancial assets you did not	already list			
	the dollar value of all of yo art 4. Write that number h			nny entries for pages you have attached	\$5,079.10
Part 5: Des	scribe Any Business-Related	Property You	Own or Have an Interest Ir	n. List any real estate in Part 1.	
No. Go	own or have any legal or equit to Part 6. Go to line 38.	able interest i	n any business-related pro	pperty?	
	scribe Any Farm- and Comme ou own or have an interest in fa			or Have an Interest In.	
No.	own or have any legal of Go to Part 7. . Go to line 47.	r equitable i	nterest in any farm- or	commercial fishing-related property?	
					Current value of the portion you own?  Do not deduct secured claims or exemptions.
Part 7: Des	scribe All Property You Own o	or Have an Inte	erest in That You Did Not I	List Above	

53. Do you have other property of any kind you did not already list?

Official Form 106A/B Schedule A/B: Property

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Debt	tor 1	Kelley Michelle Partak			Case number (if known)	
	Examp	eles: Season tickets, country club membership	)			
	No					
	Yes.	Give specific information				
54.	Add t	he dollar value of all of your entries from F	art 7. Write that	number here		\$0.00
Part 8	8: List	t the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$95,000.00
56.	Part 2	: Total vehicles, line 5		\$5,594.00		
57.	Part 3	: Total personal and household items, line	- 15	\$800.00		
58.	Part 4	: Total financial assets, line 36	_	\$5,079.10		
59.	Part 5	: Total business-related property, line 45	_	\$0.00		
60.	Part 6	: Total farm- and fishing-related property,	line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+ _	\$0.00		
62.	Total	personal property. Add lines 56 through 61.		\$11,473.10	Copy personal property total	al <b>\$11,473.10</b>

Official Form 106A/B

Schedule A/B: Property

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$106,473.10

			11 1 000 10 01 00		
Fill in this infor	mation to identify your	case:			
Debtor 1	Kelley Michelle P	artak			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this amended filing	

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--

Pa	Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.					
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	1045 East First Street Coal City, IL 60416 Grundy County Value =\$85,000 - \$95,000 based on condition of home. Needs new roof, house is on a slant and needs new foundation / house is sinking- house needs to be lifted and a new foundations needs to be p Line from Schedule A/B: 1.1	\$95,000.00		\$15,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901				
	2007 Chevy HHR 160,000 miles Need Repair / Poor Condition Value = \$1,000 Line from Schedule A/B: 3.1	\$1,000.00		\$2,400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)				

<b>Television (2), Laptop</b> Line from <i>Schedule A/B</i> : <b>7.1</b>	\$200.00	\$80.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Personal Used Clothing of Debtor Line from Schedule A/B: 11.1	\$400.00	\$400.00	735 ILCS 5/12-1001(a)
Line nom estisado 702. TTT		100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	The state of the s		Specific laws that allow exemption
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Checking Account Standard Bank Value = \$900 (highest in month after	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
	pay check deposited) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	401 (K) Through Employer Line from Schedule A/B: 21.1	\$1,159.10		\$1,159.10	735 ILCS 5/12-1006
	Line Ironi Scriedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	2015 Projected Tax Refund Line from Schedule A/B: 28.1	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(b)
	Line Holli Golleddie AVD. 20.1			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance Through Employer - No Cash Value	Unknown		\$0.00	215 ILCS 5/238
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every 3			iled on or after the date of adjustme	ent.)
	■ No				
	☐ Yes. Did you acquire the property covered	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

	Document	Page 18	of 55		
Fill in this information to identif	y your case:				
Debtor 1 Kelley Mich	velle Partak				
First Name	Middle Name	Last Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for	or the: NORTHERN DISTRICT OF ILL	INOIS		+	
Office States Barikruptey Sourt is	THE THE TENT DISTRICT OF THE			-	
Case number					
(if known)				☐ Check	if this is an
				ameno	ded filing
O#: -:-! F 400D					
Official Form 106D					
Schedule D: Credite	ors Who Have Claims	Secured	by Propert	У	12/15
	71. 164				
	ible. If two married people are filing togethe it out, number the entries, and attach it to the				
known).			, , , , , , , , , , , , , , ,	, ,	
1. Do any creditors have claims secur	ed by your property?				
☐ No. Check this box and sub	omit this form to the court with your othe	r schedules. Yo	ou have nothing else	to report on this form.	
Yes. Fill in all of the inform	ation below				
Part 1: List All Secured Claim	18		Column A	Column B	Column C
	has more than one secured claim, list the cred		Amount of claim	Value of collateral	Unsecured
	as a particular claim, list the other creditors in feal order according to the creditor's name.	an 2. As much	Do not deduct the	that supports this	portion
			value of collateral.	claim	If any
2.1 Financial Plus	Describe the property that secures t		\$3,970.18	\$4,594.00	\$0.00
Creditor's Name	2004 Nissan Murano 80,000	miles			
	(co-signed for daughter) Value = \$4,594 Per KBB Sea	wa b			
	(1/11/16)	iren			
202 01	As of the date you file, the claim is:	 Check all that			
800 Chesnut Street	apply.				
Ottawa, IL 61350	Contingent				
Number, Street, City, State & Zip Cod					
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	_		- a d		
Debtor 1 only	An agreement you made (such as r car loan)	nortgage or secur	eu		
Debtor 2 only	<u> </u>				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	hanic's lien)			
At least one of the debtors and anot	<u> </u>				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
community dobt					
Date debt was incurred	Last 4 digits of account numb	oer 0320			
			<b>* * * * * * * * * *</b>	***	***
2.2 Grundy Bank Creditor's Name	Describe the property that secures t		\$15,023.79	\$95,000.00	\$0.00
Creditor's Name	1045 East First Street Coal (	Sity, IL			
	60416 Grundy County Value =\$85,000 - \$95,000 ba	asad on			
	condition of home.	iseu on			
	Needs new roof, house is or	n a slant			
	and needs new foundation /	house			
	is sinking- house needs to l	oe lifted			
	and a new foundatio				
PO Box 520	As of the date you file, the claim is: 0 apply.	Sheck all that			
Morris, IL 60450	Contingent				
Number, Street, City, State & Zip Cod					
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as r	nortgage or secur	red		
Debtor 2 only	car loan)				

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Debtor 1 and Debtor 2 only

Official Form 106D

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Debtor 1 Kelley Michelle Partak			Case number (if know)		
First Name Middle	Name Last Name				
☐ At least one of the debtors and another☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit☐ ☐ Other (including a right to offset)	Line of Credit			
Date debt was incurred	Last 4 digits of account number	1035			
2.3 Grundy Bank	Describe the property that secures the	claim:	\$78,010.73	\$95,000.00	\$0.00
Creditor's Name	1045 East First Street Coal Cit 60416 Grundy County Value =\$85,000 - \$95,000 base condition of home. Needs new roof, house is on a and needs new foundation / h is sinking- house needs to be and a new foundatio	ed on a slant ouse lifted			
PO Box 520	As of the date you file, the claim is: Che apply.	ck all that			
Morris, IL 60450	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as more car loan)	tgage or se	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Secure	<u>d</u>		
Date debt was incurred	Last 4 digits of account number	7167			
If this is the last page of your form, add Write that number here:	Column A on this page. Write that number I the dollar value totals from all pages.	here:	\$97,004.70 \$97,004.70		
Use this page only if you have others to be to collect from you for a debt you owe to	pe notified about your bankruptcy for a del someone else, list the creditor in Part 1, a ed in Part 1, list the additional creditors he	nd then list	t the collection agency here. Sin	nilarly, if you have more	than one
Name Address -NONE-	On	which lii	ne in Part 1 did you ente	r the creditor?	
			s of account number		

		Document	Page 20 of	55		
Fill in this infor	mation to identify your	case:				
Debtor 1	Kelley Michelle Pa	Middle Name	Last Name			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)					_	if this is an
					] ameno	ded filing
Official Fo	m 106E/F					
Schedule	E/F: Creditors	Who Have Unsecu	red Claims			12/15
Schedule G: Execu D: Creditors Who I the Continuation P number (if known)	utory Contracts and Unexpi Have Claims Secured by Pro age to this page. If you hav	that could result in a claim. Also li red Leases (Official Form 106G). D operty. If more space is needed, co e no information to report in a Par asecured Claims	o not include any crec opy the Part you need,	litors with partially se fill it out, number the	cured claims that are entries in the boxes	e listed in Schedule on the left. Attach
1. Do any cre	editors have priority unsecu	red claims against you?				
☐ No. Go	to Part 2.					
Yes.						
identify who	at type of claim it is. If a claim at the claims in alphabetical o	ms. If a creditor has more than one p has both priority and nonpriority amorder according to the creditor's name particular claim, list the other creditor	ounts, list that claim here.  e. If you have more than	e and show both priority	and nonpriority amou	unts. As much as
(For an exp	planation of each type of clain	n, see the instructions for this form in	the instruction booklet.	) Total claim	Priority amount	Nonpriority amount
2.1						
	County Collector	Last 4 digits of account n	umber 4PIN	_ \$2,952.20	\$ 2,952.20	\$ \$0.00
Priority C	reditor's Name <b>k 689</b>	When was the debt incur	red?			
Morris	IL 60450 Street City State Zlp Code	As of the date way file th	a alaim io. Chaal: all th	ant annie	_	
		As of the date you file, the	e ciaim is: Check all tr	іат арріу		
_	urred the debt? Check one.	☐ Contingent				
■ Debto	•	☐ Unliquidated				
Пълг	4 151: 0 1	По:				
	r 1 and Debtor 2 only st one of the debtors and and	☐ Disputed				
_	k if this claim is for a	Type of PRIORITY unsecu	ured claim:			
commun		☐ Domestic support obliga	ations			
■ No	•	■ Taxes and certain other		ornmont		
☐ Yes		☐ Claims for death or pers	, ,			
00		Other. Specify	oonar injary willio you w	oro mioxidatoa		
		- Other: opeony				_
Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cre	editors have nonpriority uns	secured claims against you?				
☐ No. You	u have nothing to report in this	s part. Submit this form to the court v	vith your other schedule	S.		
Yes.						
4 Lint all of	your nonnriority unoccured	claims in the alphabetical order of	f the eventites who had	la acab alaim If a arad	liter has more than an	a nannuiauit.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Document Page 21 of 55 Debtor 1 Kelley Michelle Partak Case number (if know) 4.1 1,018.44 **Bank of America** 4859 Last 4 digits of account number Nonpriority Creditor's Name PO Box 982238 When was the debt incurred? El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset?  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card purchases Other. Specify 4.2 Bills Heating and Air 162.50 Conditioning Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 101 Vine Street Wilmington, IL 60481 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Trade debt ☐ Yes Other. Specify 4.3 Capital One Bank 9410 6.000.07 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset?  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Credit card purchases

Debtor	Case 16-01575 DOC 1  1 Kelley Michelle Partak	Document Page 22 of 55  Case number (if know)	esc Mair	1
4.4	Cary Ann Jenkins, MD	Last 4 digits of account number 2617	\$	29.52
	Nonpriority Creditor's Name  1499 Lakewood Drive, Unit A	When was the debt incurred?		
	Morris, IL 60450  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Debt		
4.5	Chase Receivables	Last 4 digits of account number 0001	\$	1,196.99
	Nonpriority Creditor's Name 1247 Broadway	When was the debt incurred?		
	Sonoma, CA 95476  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	- Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Collection for Sprint		
4.6	CitiCards	Last 4 digits of account number 5730	\$	8,308.81
	Nonpriority Creditor's Name		<u> </u>	<u> </u>
	Processing Center Des Moines, IA 50363	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	Eliza estado		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		

■ No ☐ Yes

Official Form 106 E/F

debt

not report as priority claims

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did

Credit card purchases

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

Other. Specify

 $\hfill\square$  Check if this claim is for a community

Is the claim subject to offset?

Document Page 23 of 55 Debtor 1 Kelley Michelle Partak Case number (if know) 4.7 319.62 **Creditors Discount & Audit** 6755 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 415 East Main Street PO Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify 4.8 **Digestive Health Associates** 150.03 1824 Last 4 digits of account number \$ Nonpriority Creditor's Name 1100 Houbolt Road When was the debt incurred? Joliet, IL 60431 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

4.9 Dr. Douglas Halkyard

☐ Yes

Nonpriority Creditor's Name 110 East Jackson Street

Morris, IL 60450

Number Street City State Zlp Code

Last 4 digits of account number

7264

**Medical Debt** 

53.25

When was the debt incurred?

Other. Specify

As of the date you file, the claim is: Check all that apply

Debtor	Case 16-01575 Doc 1  1 Kelley Michelle Partak	Filed 01/19/16 Document		red 01/19/16 16:28:19 24 of 55 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising or not report as priority clair		ration agreement or divorce that you did		
	■ No	☐ Debts to pension or p	orofit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify	Medic	al Debt		
4.10	Grundy Radiologists	Last 4 digits of accoun	t number	GRI1	\$	62.81
	Nonpriority Creditor's Name PO Box 3273 Indianapolis, IN 46206	When was the debt inc	urred?			
	Number Street City State ZIp Code	As of the date you file,	the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	_				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY	uncocuroc	l claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	unsecured	rciaiii.		
	debt	_				
	Is the claim subject to offset?	ration agreement or divorce that you did				
	■ No	Debts to pension or p	orofit-sharin	g plans, and other similar debts		
	Yes	Other. Specify	Medic	al Debt		
4.11	Healthcare Centers of Morris Hospit	Last 4 digits of accoun	t number	7694	\$	31.94
	Nonpriority Creditor's Name 25259 Reed Street Channahon, IL 60410	When was the debt inc	urred?			
	Number Street City State Zlp Code	As of the date you file,				
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	_				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY	unsecured	l claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Student loans	4110004100	· oranii		
	debt	_				
	Is the claim subject to offset?	□ Obligations arising or not report as priority clair		ration agreement or divorce that you did		
	■ No	☐ Debts to pension or p	orofit-sharin	g plans, and other similar debts		
	Yes	al Debt				
4.12	Illinois Valley Surgical					27.93
	Associates Nonpriority Creditor's Name	Last 4 digits of accoun			\$	

Ottawa, IL 61350

Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Document Page 25 of 55 Case number (if know) Debtor 1 Kelley Michelle Partak Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.13 Jennifer Jones, MD 3685 27.24 Last 4 digits of account number Nonpriority Creditor's Name 1499 Lakewood Drive When was the debt incurred? Unit C Morris, IL 60450 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.14 John Bolden Junior, MD 177.80 Last 4 digits of account number 0550 \$ Nonpriority Creditor's Name 10600 West 143rd Street When was the debt incurred? Suite B Orland Park, IL 60462 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify

Official Form 106 E/F

4.15

Last 4 digits of account number

7566

5,179.12

LTD Financial Services

Nonpriority Creditor's Name

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Debtor	1 Kelley Michelle Partak		Case number (if know)		
	7322 Southwest Freeway Suite 1600	When was the debt incurred?			
	Houston, TX 77074  Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Collect	tion		
.16	Meyer & Njus, P.A.	Last 4 digits of account number	C748	\$	1,494.91
	Nonpriority Creditor's Name 33 N. Dearborn Street Suite 1301	When was the debt incurred?			
	Chicago, IL 60602  Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	g .			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Attorn	ey (Collection)		
.17	Morris Hospital	Last 4 digits of account number	5233	\$	1,607.65
	Nonpriority Creditor's Name Business Office 150 West Street	When was the debt incurred?		_	
	Morris, IL 60450  Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	_			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	not report as priority claims	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medic	al Debt		

MRS Associates of New Jersey	Last 4 digits of accou	nt number 9593	\$	5,1						
Nonpriority Creditor's Name 1930 Olney Ave Cherry Hill, NJ 08003	When was the debt in	curred?								
Number Street City State Zlp Code	As of the date you file									
Who incurred the debt? Check one.	☐ Contingent									
Debtor 1 only										
Debtor 2 only	☐ Unliquidated									
☐ Debtor 1 and Debtor 2 only	☐ Disputed									
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:									
☐ Check if this claim is for a community debt										
Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims								
■ No	☐ Debts to pension or	profit-sharing plans, and other similar debts								
Yes	Other. Specify	Collection for Chase								
Murphy Lamon & Associates	Last 4 digits of accou	nt number 6446	\$	2						
Nonpriority Creditor's Name	When was the debt in									
2860 River Road Suite 200	when was the debt in	curred?								
Des Plaines, IL 60018										
Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply								
Who incurred the debt? Check one.	☐ Contingent									
Debtor 1 only										
Debtor 2 only	☐ Unliquidated									
☐ Debtor 1 and Debtor 2 only	☐ Disputed									
☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:								
☐ Check if this claim is for a community debt	☐ Student loans									
Is the claim subject to offset?	☐ Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims								
■ No	Debts to pension or	profit-sharing plans, and other similar debts								
■ NO										

4.20 New York and Company

Nonpriority Creditor's Name

PO Box 659728

San Antonio, TX 78265

Number Street City State Zlp Code

Last 4 digits of account number

7725

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

260.91

Debtor	1 Kelley Michelle Partak	Document Page 28 of 55 Case number (if know)		
	Who incurred the debt? Check one.	□ Contingent		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit card purchases		
4.21	Sherwin Ritz MD	Last 4 digits of account number 3085	\$	197.80
	Nonpriority Creditor's Name 35 East Willow Street	When was the debt incurred?		
	Coal City, IL 60416  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	·		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify  Medical Debt		
4.22	Southwest Rapid Rewards	Last 4 digits of account number 9593		5,179.12
4.22	Nonpriority Creditor's Name	Last 4 digits of account number 9593	\$	3,179.12
	PO Box 15153 Wilmington, DE 19886	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit card purchases	_	
4.23	TJ Max Rewards	Last 4 digits of account number 1945	\$	1,494.91
	Nonpriority Creditor's Name PO Box 530949 Atlanta CA 20252	When was the debt incurred?		
	Atlanta, GA 30353  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Debtor	Kelley Michelle Partak	Document	Page	29 01 55 Case number (if know)					
	Who incurred the debt? Check one.	Пол	_	· ,					
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	•	_ `							
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY	/ unsecured	l claim:					
	☐ Check if this claim is for a community								
	debt								
	Is the claim subject to offset?	Obligations arising on ot report as priority cla		ration agreement or divorce that you did					
	■ No	☐ Debts to pension or	profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify	Credit	card purchases					
4.24	Victorias Secret	Last 4 digits of accour	nt number	8252	\$	390.64			
	Nonpriority Creditor's Name PO Box 659728	When was the debt inc	ourrod?						
	San Antonio, TX 78265	When was the dept in	curreur						
-	Number Street City State Zlp Code	As of the date you file	, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent							
	■ Debtor 1 only	· ·							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured	I claim:					
	☐ Check if this claim is for a community ☐ Student loans								
	debt Is the claim subject to offset?			ration agreement or divorce that you did					
	is the claim subject to onset?								
	■ No	not report as priority cla  Debts to pension or		g plans, and other similar debts					
	☐ Yes	card purchases							
	00	Other. Specify							
Part 3:	List Others to Be Notified About a D	ebt That You Already Li	sted						
5. Use thi trying more t	is page only if you have others to be notified to collect from you for a debt you owe to som han one creditor for any of the debts that you bts in Parts 1 or 2, do not fill out or submit the	about your bankruptcy, for neone else, list the original I listed in Parts 1 or 2, list th	a debt that y	Parts 1 or 2, then list the collection agenc	y here. Similarl	ly, if you have			
	and Address	-		rt2 did you list the original creditor					
	Interstate x 4000	Line <u>4.18</u> of ( <i>Check o</i>	ne):	Part 1: Creditors with Priority U					
	nton, VA 20188			Part 2: Creditors with Nonprior	ity Unsecure	ed Claims			
	•	Last 4 digits of accou	ant numbe	er					
Name Chase	and Address			rt2 did you list the original creditor		laine e			
	x 15548	Line <u>4.15</u> of ( <i>Check o</i>	ne).	<ul><li>□ Part 1: Creditors with Priority L</li><li>■ Part 2: Creditors with Nonprior</li></ul>					
Wilmir	ngton, DE 19886			·	ity Orisecure	u Ciaiiis			
		Last 4 digits of accou	ınt numbe	er					
	and Address			rt2 did you list the original creditor	r?				
	ors Discount & Audit ast Main Street	Line <u>4.10</u> of ( <i>Check o</i>	ne):	Part 1: Creditors with Priority U					
PO Bo				■ Part 2: Creditors with Nonprior	ity Unsecure	ed Claims			
Streat	or, IL 61364	1 4 4 2 2 2							
		Last 4 digits of accou	ınt numbe	er ————————————————————————————————————					
	and Address			rt2 did you list the original creditor					
	ors Discount & Audit ist Main Street	Line 4.8 of (Check on	e):	Part 1: Creditors with Priority U					
PO Bo				Part 2: Creditors with Nonprior	ity Unsecure	ed Claims			

Official Form 106 E/F

Debtor 1 Kelley Michelle Partak		Case number (if know)							
Streator, IL 61364									
·	Last 4 digits of account nu	Last 4 digits of account number							
Name and Address	On which entry in Part 1 or	Part2 did you list the original creditor?							
MiraMed Revenue Group	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims							
Dept. 77304		■ Part 2: Creditors with Nonpriority Unsecured Claims							
Detroit, MI 48277	Last 4 digits of account nu	mber							
Name and Address	On which entry in Part 1 or	Part2 did you list the original creditor?							
PRCL Letter Service	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims							
PO Box #1 Morris, IL 60450		■ Part 2: Creditors with Nonpriority Unsecured Claims							
, 00 .00	Last 4 digits of account nu	mber							

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims	CI-	Towns and a setsin other debts are sure the assurement	CI-	•	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,952.20
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	\$	2,952.20
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	38,800.11
	6j.	Total. Add lines 6f through 6i.	6j.	\$	38,800.11

Fill in this infor	rmation to identify your	case:		
Debtor 1	Kelley Michelle P	artak		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				
(ii known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Document	Page 32 of 55	<u> </u>
Fill in th	is information to identify your	case:		
Debtor 1	Kelley Michelle Pa			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, f	iling) First Name	Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case nur	nber			☐ Check if this is an amended filing
	al Form 106H dule H: Your Code	ebtors		12/15
people ar	e filing together, both are equa	ally responsible for supplying boxes on the left. Attach the left.	correct information. If more space	ccurate as possible. If two married e is needed, copy the Additional Page, ee top of any Additional Pages, write
1. Do	you have any codebtors? (If y	ou are filing a joint case, do not	list either spouse as a codebtor.	
□ No				
			y state or territory? (Community proico, Texas, Washington, and Wiscon	
	o. Go to line 3. es. Did your spouse, former spou	se, or legal equivalent live with	you at the time?	
in lir Forn	ne 2 again as a codebtor only it	that person is a guarantor or	cosigner. Make sure you have list	filing with you. List the person shown ted the creditor on Schedule D (Officia le D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zli	<sup>2</sup> Code		e creditor to whom you owe the debt edules that apply:
3.1	Michelle Partak 1045 East First Street Coal City, IL 60416		☐ Schedule ☐ Schedule ☐ Schedule	D, line E/F, line G

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	in this information to otor 1													
Der	-	Kelley Miche	elle Partak				_							
	otor 2 buse, if filing)						_							
Uni	ted States Bankrupto	cy Court for the	: NORTHERN DISTRIC	T OF ILL	NOIS		_							
Cas	se number							Chec	k if this is	s:				
(If kr	nown)							ΠА	n amend	ed f	iling			
												ng postpet following o		chapter
<u>O</u>	fficial Form	<u> 106l</u>						M	IM / DD/ `	YYY	<u>/Y</u>			
S	chedule I: Y	our Inc	ome											12/15
spo atta	use. If you are sepa ch a separate sheet	arated and you	are married and not fili r spouse is not filing w On the top of any additi	ith you, d	o not include	e infor	mati	on abou	t your sp	oous	se. If m	nore spac	e is r	needed,
1.	Fill in your emplo information.	yment		Debtor	1				Debtor	2 01	r non-f	iling spo	use	
	If you have more th		Employment status	■ Emp	loyed				☐ Emp	loye	ed			
		attach a separate page with information about additional		☐ Not employed				□ Not e	emp	loyed				
			Occupation	Cook										
	Include part-time, s self-employed work		Employer's name	Morris	Hospital									
	Occupation may in or homemaker, if it		Employer's address		est High St , IL 60450	reet								
			How long employed to	here?	5 Years				_					
Par	t 2: Give Deta	ails About Mor	nthly Income											
spou If yo	use unless you are s	eparated. spouse have mo	ate you file this form. If one than one employer, countries form.	•						•		•		J
								For Dek	otor 1			btor 2 or ing spou		
2.			ry, and commissions (b calculate what the month			2.	\$	2,	,917.66	. ;	\$	N	I/A	
3.	Estimate and list	monthly overt	ime pay.			3.	+\$		0.00		+\$	N	I/A	
1	Calculate gross le	ncomo Add lir	oo 2 u lino 3			4	•	2.01	7 66		Ф	NI/A		

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Debt	or 1	Kelley Michelle Partak	-	(	Case r	number ( <i>if ki</i>	nown)				
					For	Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$	2,91	7.66	\$		N/	A
5.	List	all payroll deductions:									
0.	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	633	2.19	\$		N/	Δ
	5b.	Mandatory contributions for retirement plans	5k		\$		0.00	\$_		N/	
	5c.	Voluntary contributions for retirement plans	50	c.	\$		0.00	\$		N/	A
	5d.	Required repayments of retirement fund loans	50	d.	\$	(	0.00	\$		N/	A
	5e.	Insurance	56		\$		4.19	\$		N/A	
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	
	5g. 5h.	Union dues Other deductions Specific	5g	g. h.+	\$ \$		0.00	* + *		N/	
_		Other deductions. Specify:	_		-			· : —		N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		6.38	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,23	1.28	\$		N/	<u>A</u>
8.	List 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$		0.00	\$		N/	Δ
	8b.	Interest and dividends	8k		\$		0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C.	\$		0.00	\$		N/A	<b>A</b>
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		N/A	A
	8e.	Social Security	86	Э.	\$		0.00	\$		N/	A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f		\$		0.00	\$		N/2 N/2	
	8g. 8h.	Other monthly income. Specify:	8( 8k	y. h.+	\$ _		0.00	+ \$_		N/A	
	011.		_ "								<u>`</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [	<b>.</b>	(	0.00	\$		N	/A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,231.28	+ \$		N/A	= \$	2,231.28
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· -		,					_,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	dep		•	•				le J. +\$ _	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certallies							e. 12.	\$	2,231.28
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							Comb	oined hly income
	_	Voc Evolain:									

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E.II .	in this information	Cara ta Salam Chara							
FIII	n this informat	tion to identify yo	ur case:						
Debt	tor 1	Kelley Michel	lle Parta	k		Cł	neck if	this is:	
							An a	amended filing	
Debt									ving postpetition chapter
(Spo	use, if filing)						13 e	expenses as of	the following date:
Unite	ed States Bankru	uptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	NOIS		MM	/ DD / YYYY	
Case	e numbe <b>r</b>								
(If kn	nown)								
	ficial Fo	rm 100 l							
		rm 106J							
Sc	chedule	J: Your E	Exper	ises					12/15
info	rmation. If m		eded, atta	. If two married people and another sheet to this n.					
Part		ibe Your Housel	hold						
1.	Is this a join								
	No. Go to								
	☐ Yes. <b>Doe</b> s	s Debtor 2 live i	n a separ	ate household?					
	□ No		t file Offic	ial Form 106J-2, <i>Expense</i>	es for Separate House	ehold of D	ebtor 2	2.	
2.	Do you have	e dependents?	□ No						
	Do not list De and Debtor 2		■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents i				Son			19	■ Yes
									□ No
					Daughter		;	23	Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
3.	expenses of	enses include people other the your depender	nan $_{f \Box}$	No Yes					
exp	mate your ex		ur bankr	uptcy filing date unless					apter 13 case to report of the form and fill in the
the		n assistance and		government assistance cluded it on <i>Schedule I:</i>				Your expe	enses
4.		r home ownersh d any rent for the		uses for your residence. or lot.	Include first mortgage	e 4.	\$		414.75
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$		250.00
		ty, homeowner's	, or renter	's insurance		4b.	- : -		66.00
		•		upkeep expenses		4c.	\$		0.00
	4d. Homeo	owner's associati	ion or con	dominium dues		4d.	\$		0.00
5	Additional n	ortasae navme	nte for ve	our residence such as h	ome equity loans	5	Φ.		60.63

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Deb	otor 1	Kelley M	lichelle Partak	Case num	nber (if known)				
6.	Utilit	ies:							
٥.	6a.		, heat, natural gas	6a.	\$	180.00			
	6b.		wer, garbage collection	6b.		112.00			
	6c.		e, cell phone, Internet, satellite, and cable services	6c.		182.68			
	6d.	Other. Sp		6d.		0.00			
7.			sekeeping supplies	7.		400.00			
8.			children's education costs	8.	· ·	0.00			
9.	Cloth	hing, laund	lry, and dry cleaning	9.	\$	20.00			
10.		•	products and services	10.	· ·	10.00			
		-	ental expenses	11.	\$	0.00			
			Include gas, maintenance, bus or train fare.		· —				
			ear payments.	12.	\$	300.00			
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00			
14.	Char	ritable cont	tributions and religious donations	14.	\$	0.00			
15.	Insur	rance.			-				
	Do no	ot include ir	nsurance deducted from your pay or included in lines 4 or 20.						
	15a.	Life insura	ance	15a.		0.00			
	15b.	Health ins	surance	15b.	\$	0.00			
	15c.	Vehicle in	surance	15c.	\$	243.00			
	15d.	Other insu	urance. Specify:	15d.	\$	0.00			
16.			nclude taxes deducted from your pay or included in lines 4 or 20.						
	Spec	cify:		16.	\$	0.00			
17.			ease payments:						
			ents for Vehicle 1	17a.	·	0.00			
			ents for Vehicle 2	17b.	· ·	0.00			
		Other. Sp		17c.	\$	0.00			
		Other. Sp		17d.	\$	0.00			
18.			of alimony, maintenance, and support that you did not repor		<b>c</b>	0.00			
40			your pay on line 5, Schedule I, Your Income (Official Form 10	<b>1</b> 8.					
19.			s you make to support others who do not live with you.	10	\$	0.00			
00	Spec			19.					
20.			perty expenses not included in lines 4 or 5 of this form or on \$			0.00			
			s on other property	20a.	·	0.00			
		Real estat		20b.		0.00			
			homeowner's, or renter's insurance	20c.	· ·	0.00			
			nce, repair, and upkeep expenses	20d.	*	0.00			
			ner's association or condominium dues	20e.	*	0.00			
21.	Othe	r: Specify:		21.	+\$	0.00			
22.	Calc	ulate vour	monthly expenses						
		•	through 21.		\$	2.239.06			
			22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	2,200.00			
		. ,	a and 22b. The result is your monthly expenses.	-	\$	2 220 06			
	220.	Add lifte 22	a and 22b. The result is your monthly expenses.		Φ	2,239.06			
23.	Calc	ulate your	monthly net income.						
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	2,231.28			
			r monthly expenses from line 22c above.	23b.	-\$	2,239.06			
			• •			,			
	23c.		your monthly expenses from your monthly income.			7.70			
		The result	t is your monthly net income.	23c.	\$	-7.78			
	_			<u></u>					
24.		Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
			bu expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	our mortgage pa	ayrnent to increase	e or decrease decause of a			
	■ No.								
			Evoloin horo:						
	□ Ye	es.	Explain here:						

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Fill in this infor	mation to identify your o	case:			
Debtor 1	Kelley Michelle Pa				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	T OF ILLINOIS		
Case number _ (if known)					☐ Check if this is an amended filing
Official Forn		In alle data and	Dalataria O	ala a dada a	
Declarat	ion About a	n individual	Debtor's S	chedules	12/15
obtaining money years, or both. 1		connection with a ban			atement, concealing property, or 000, or imprisonment for up to 20
Did you pa	y or agree to pay somed	one who is NOT an atto	rney to help you fill ou	ut bankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Peti and Signature (Official F	ition Preparer's Notice, Declaration, form 119).
	alty of perjury, I declare t e true and correct.	hat I have read the sun	nmary and schedules	filed with this declarat	tion and
X /s/ Kell	ley Michelle Partak		X		
Kelley	Michelle Partak re of Debtor 1		Signature	of Debtor 2	

Date

Date **January 19, 2016** 

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Fill	in this inform	ation to identify you	r case:			
	otor 1	Kelley Michelle F				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Cas	se number					
(if kr	nown)					heck if this is an mended filing
<u>~</u>	C	4.07				
	ficial For atement		Affairs for Individ	uals Filing for B	ankruptcv	12/15
Be a	as complete ar	nd accurate as possi	ble. If two married people a	re filing together, both are	equally responsible for sup	plying correct
		). Answer every ques		this form. On the top of an	y additional pages, write you	ir name and case
Par	t 1: Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	_					
	<ul><li>■ Married</li><li>■ Not marr</li></ul>	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	v.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.					nity property state or territor	
state	es and territorie	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	/isconsin.)
	■ No			W		
	☐ Yes. Mal	ce sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,346.61	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	
			- Operating a business		- i	

Official Form 107

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Page 39 of 55 Case number (if known) Document Debtor 1 Kelley Michelle Partak

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	r last cale	ndar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$34,494.34	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
		ndar year be December		■ Wages, commissions, bonuses, tips	\$30,846.00	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	unemploy gambling List each  No	ment, and o and lottery v	ther public be vinnings. If ye the gross inc	her that income is taxable. Exa enefit payments; pensions; rer ou are filing a joint case and yo ome from each source separa	ntal income; interest; divident ou have income that you rec	nds; money collect ceived together, lis	ed from laws	suits; royalties; and
				Debtor 1		Debtor 2		
				Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither De	ebtor 1 nor I	e's debts primarily consumer Debtor 2 has primarily consumants personal, family, or househouse	ımer debts. Consumer deb	ts are defined in 1	1 U.S.C. § 1	01(8) as "incurred by an
		□ No.	90 days before 5	ore you filed for bankruptcy, di 7.	d you pay any creditor a tota	al of \$6,225* or mo	ore?	
		□ <sub>Yes</sub>	paid that ci	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	its for domestic support obli			
		* Subject	to adjustmer	nt on 4/01/16 and every 3 year	s after that for cases filed or	n or after the date	of adjustme	nt.
	■ Yes.			or both have primarily consurer you filed for bankruptcy, di		al of \$600 or more	?	
		□ No.	Go to line	7.				
		■ Yes	include pay	each creditor to whom you pai /ments for domestic support o / for this bankruptcy case.				
	Creditor	's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for
	Grundy PO Box Morris,			Nov, Dec, Jan Mortgage Payment		\$0.00		

☐ Other\_\_

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De	btor 1	Kelley Michelle Partak	Document	Cas	e number (if known)		
7.	Inside corpo includ	n 1 year before you filed for bankrupters include your relatives; any general parations of which you are an officer, directling one for a business you operate as a part and alimony.	artners; relatives of any ge ctor, person in control, or o	eneral partners; partners where of 20% or more	erships of which your of their voting sec	ou are a genera curities; and an	al partner; y managing agent,
		No Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside Includ	n 1 year before you filed for bankrupter? le payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a de	ebt that benefited a
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for I	this payment tor's name
Pa	rt 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
	□ 1 ■ 1	ications, and contract disputes.  No Yes. Fill in the details.	Notice of the coop	Court		Chartura of the	
		e title e number	Nature of the case	Court or agency		Status of the	e case
		chrony Bank v. Kelley Partak SC 748	Collection	Grundy County	1	■ Pending □ On appea □ Conclude	
10.	Check	n 1 year before you filed for bankrupt k all that apply and fill in the details belo		perty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied
		Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date		Value of th propert
11.	accou	n 90 days before you filed for bankru unts or refuse to make a payment bed No Yes. Fill in the details.			nancial institutior	n, set off any a	amounts from your
	Cred	litor Name and Address	Describe the action th	e creditor took	Date a	action was	Amour
					tanen		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

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Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more	e than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift or cor	tcy, did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupt disaster, or gambling?  ■ No □ Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other
	Describe the property you lost and how the loss occurred Ir	escribe any insurance coverage for the loss clude the amount that insurance has paid. List ending insurance claims on line 33 of Schedule A/B: roperty.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pro	cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services requir	, , ,	rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Banyon & Scheinbaum, LLC 3077 West Jefferson Street Suite 107 Joliet, IL 60435	\$450 - Attorney Fee \$335 - Filing Fee \$20 - Credit Counseling (direct to agency)		\$0.00
17.		cy, did you or anyone else acting on your behalf payors or to make payments to your creditors?  ou listed on line 16.	y or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Case number (if known) Document

Debtor 1 **Kelley Michelle Partak** 

18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No  Yes. Fill in the details.	ousiness or financial afformation as security (such as	airs? the granting of a			
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any payments recrepaid in exchain	eived or debts	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre		ny property to a	self-settled trust o	or similar device o	of which you are a
	Yes. Fill in the details.					
						Date Transfer was made
Par	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and St	orage Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ■ No □ Yes. Fill in the details.	or other financial accou	ınts; certificates	of deposit; share		, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	ont or Date acclosed moved transfer	l, or	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, ar	ny safe deposit bo	x or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the con	tents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year before you fi	led for bankruptcy	y
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the conf	ents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	I for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any properi	y you borrowed fi	om, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the prop	perty	Value
Par	t 10: Give Details About Environmental Inf	formation				
F	the number of Port 40, the following definit					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Page 43 of 55
Case number (if known) Document

**Kelley Michelle Partak** Debtor 1

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  know it  No  Yes. Fill in the details.		hazardous material, pollutant, contaminant, or s	similar term.				
No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code) Address (Number, Street, City, State and ZiP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZiP Code)  No Yes. Fill in the details.  Case Title Case Number  Case Number  Name Address (Number, Street, City, State and ZiP Code) Name Address (Number, Street, City, State and ZiP Code) Name Address (Number, Street, City, State and ZiP Code) Name Address (Number, Street, City, State and ZiP Code)  A status of the case Status of the case Status of the case Status of the case  Yes. Fill in the details.  Case Title Case Number  Name Address (Number, Street, City, State and ZiP Code) A partner in a partnery of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership An officer, director, or mansging executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZiP Code) Name of accountant or bookkeeper  Date status of the case Name of accountant or bookkeeper  Date status of the case  Employer Identification number Do not include Social Security number or TIN Dates business existed	Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	ey occurred.		
Yes, Fill in the details.   Name of site   Address (Number, Street, City, State and ZiP Code)   Nature of the case   Status of the case Number   Name   Address (Number, Street, City, State and ZiP Code)   Nature of the case   Status of the case   Status of the case   Name   Address (Number, Street, City, State and ZiP Code)   Nature of the case   Status of the case   Name   Address (Number, Street, City, State and ZiP Code)   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Status of the case   Name   Nature of the case   Na	24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e unc	der or in violation of an environme	ental law?	
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Case Number  Case Title Case Number Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Part 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Describe the nature of the business Name of accountant or bookkeeper  Do not include Social Security number or ITIN Dates business existed		_					
No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Court or agency Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Nature of the case   Status of the case   Nature of the case   Status of the case   Status of the case   Nature of the case   Status			Address (Number, Street, City, State and			Date of notice	
Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Case Number   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Nature of the case   Status of	25. Have you notified any governmental unit of any release of hazardous material						
Address (Number, Street, City, State and ZIP Code)  Asole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A nember of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An owner of at least 5% of the voting or equity securities of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Employer Identification number Do not include Social Security number or ITIN Dates business existed  Address  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  Aname  Address  Date Issued		_ ```					
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Case Number    Name		_ ```					
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name			Name Address (Number, Street, City,	Nat	ture of the case		
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time         □ A member of a limited liability company (LLC) or limited liability partnership (LLP)         □ A partner in a partnership         □ An officer, director, or managing executive of a corporation         □ An owner of at least 5% of the voting or equity securities of a corporation         ■ No. None of the above applies. Go to Part 12.         □ Yes. Check all that apply above and fill in the details below for each business.         Business Name Address       Describe the nature of the business Name Address (Number, Street, City, State and ZIP Code)       Employer Identification number Do not include Social Security number or ITIN.         Dates business existed       Dates business existed     28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties.  In No  Yes. Fill in the details below.  Name Address  Date Issued	Par	11: Give Details About Your Business or Con	nections to Any Business				
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)         ☐ A partner in a partnership         ☐ An officer, director, or managing executive of a corporation         ☐ An owner of at least 5% of the voting or equity securities of a corporation         ☐ No. None of the above applies. Go to Part 12.         ☐ Yes. Check all that apply above and fill in the details below for each business.         Business Name       Describe the nature of the business         Address       Name of accountant or bookkeeper         Name of accountant or bookkeeper       Date business existed           28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties.       ☐ No     Yes. Fill in the details below.         Name       Date Issued	27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	ny of	the following connections to any	business?	
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□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address Name Address Name Obscribe the nature of the business Name On the include Social Security number or ITIN Name Of accountant or bookkeeper  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties.  No □ Yes. Fill in the details below.  Name Address Date Issued		☐ A member of a limited liability company	(LLC) or limited liability partnersh	hip (L	LLP)		
□ An owner of at least 5% of the voting or equity securities of a corporation  ■ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties.  ■ No  □ Yes. Fill in the details below.  Name Address  Date Issued		☐ A partner in a partnership					
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Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address  Do not include Social Security number or ITIN.  Dates business existed  Dates business? Include all financia institutions, creditors, or other parties.		☐ Yes. Check all that apply above and fill in the	he details below for each business	s.			
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☐ Yes. Fill in the details below.  Name Address  Date Issued	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business?			de all financial			
Address							
		Address	te Issued				

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

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Debtor 1 **Kelley Michelle Partak** 

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ke	elley Michelle Partak		
Kelley Michelle Partak		Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	January 19, 2016	Date	
Did yo	u attach additional pages to Your S	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)	)?
No			
□ Yes	3		
Did yo	u pay or agree to pay someone who	o is not an attorney to help you fill out bankruptcy forms?	
No			
☐ Yes	s. Name of Person Attach the	Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

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Debtor 1  Kelley Michelle Partak First Name Middle Name Last Name  Debtor 2 (Spouse if, filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number (if known)  Check if tl	
First Name Middle Name Last Name  Debtor 2 (Spouse if, filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	
(Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	
Case number	
Case number	
(If known)	
amended	
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Official Form 108	
Statement of Intention for Individuals Filing Under Chapter 7	12/15
·	
If you are an individual filing under chapter 7, you must fill out this form if:	
creditors have claims secured by your property, or	
you have leased personal property and the lease has not expired.	
You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of	
whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and less on the form	ors you list
If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both de sign and date the form.	otors must
Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any addit write your name and case number (if known).	onal pages,
write your name and case number (ii known).	
Part 1: List Your Creditors Who Have Secured Claims	
1. For any graditors that you listed in Part 1 of Schodula Dr. Craditors Who Have Claims Secured by Property (Official Form 106)	)\ fill in the
<ol> <li>For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106l information below.</li> </ol>	η, mi in the
Identify the creditor and the property that is collateral  What do you intend to do with the property that  Did you claim	
secures a debt? as exempt on	Scheaule C
Creditor's Grundy Bank Surrender the property.	
name: Retain the property and redeem it.	
name:  Retain the property and redeem it.  Retain the property and enter into a	
name:  Retain the property and redeem it.  Description of 1045 East First Street Coal City,  Reaffirmation Agreement.  Yes	
name:  Description of property  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  IL 60416 Grundy County  Value - \$25,000, \$05,000 based  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and redeem it.	
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Description of property securing debt:  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	
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Description of property   1045 East First Street Coal City, IL 60416 Grundy County Value =\$85,000 - \$95,000 based on condition of home. Needs new roof, house is on a slant and needs new foundation / house is sinking- house needs to be lifted and a new foundatio    Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:    Retain the property and [explain]:    Retain the property and property.   No Retain the property and redeem it.	
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name:  Description of property   L 60416 Grundy County Value =\$85,000 - \$95,000 based on condition of home. Needs new roof, house is on a slant and needs new foundation / house is sinking- house needs to be lifted and a new foundatio  Creditor's Grundy Bank name:  Description of   1045 East First Street Coal City, IL 60416 Grundy County Value =\$85,000 - \$95,000 based   Surrender the property and redeem it.  Retain the property and redeem it.  Retain the property and [explain]:  Honor Mortgage / Discharge Note    Surrender the property.   No   No   Retain the property and enter into a   Reaffirmation Agreement.	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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B8 (Form 8) (12/08) property securing debt	to be lifted and a new foundation	■ Retain the property and [explain]:  Honor Line of Credit / Discharge Note	Page 2
For any unexpir in the information	on below. Do not list real estate leases	ses ted in Schedule G: Executory Contracts and Unexpired . Unexpired leases are leases that are still in effect; the l e if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	ease period has not yet ended.
Describe your	unexpired personal property leases	W	fill the lease be assumed?
Lessor's name: Description of le Property:	eased	_	l No
Lessor's name: Description of le Property:	eased		l No l Yes
Lessor's name: Description of le Property:	eased	_	l No
Lessor's name: Description of le Property:	eased		l No
Lessor's name: Description of le Property:	pased		l No
Lessor's name: Description of le Property:	eased		l No
Lessor's name: Description of le Property:	eased	_	l No
	Below	d my intention about any property of my estate that secu	
property that is  X /s/ Kelley	subject to an unexpired lease.  Michelle Partak	Signature of Debtor 2	iss a dost and any personal
<b>Kelley Mi</b> Signature o	chelle Partak of Debtor 1	Signature of Debtor 2	
Date _	January 19, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-01575 Doc 1 Filed 01/19/16 Entered 01/19/16 16:28:19 Desc Main Document Page 51 of 55

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In	re	Kelley Michell	e Partak				Case No	0.	
		-				Debtor(s)	Chapter	<b>7</b>	
		DIS	CLOS	URE OF COM	PENSATIO	N OF ATTO	ORNEY FOR I	DEBTOR(S)	)
1.	com	npensation paid to	me withi	a) and Fed. Bankr. P. 2 in one year before the ebtor(s) in contemplat	e filing of the petit	tion in bankrupto	cy, or agreed to be pa	aid to me, for ser	
		Ü						450.00	0
		Prior to the filin	g of this s	statement I have receive	ived		\$	450.00	<u>0</u>
		Balance Due					\$	0.00	<u>0</u>
2.	The	source of the co	mpensatio	on paid to me was:					
		Debtor	☐ Oth	her (specify):					
3.	The	source of compe	nsation to	be paid to me is:					
		Debtor	☐ Otl	her (specify):					
4.		I have not agreed	i to share	the above-disclosed c	compensation with	h any other perso	on unless they are mo	embers and assoc	ciates of my law firm.
				above-disclosed comp gether with a list of the					of my law firm. A
5.	In r	return for the abo	ve-disclos	sed fee, I have agreed	to render legal se	rvice for all aspe	ects of the bankruptc	y case, including	i.
	b. l c. l	Preparation and f Representation of [Other provisions Negotiations reaffirmat	iling of and the debto s as needed ons with ion agree	ancial situation, and r ny petition, schedules, or at the meeting of cr d] secured creditors ements and applic bidance of liens or	s, statement of affa reditors and confine s to reduce to m cations as need	airs and plan whi rmation hearing, narket value; e ded; preparatio	ich may be required; and any adjourned be exemption planning	nearings thereof;	n and filing of
6.	Ву			s), the above-disclose the debtors in any			ng service:		
					CERTIFI	ICATION			
this		ertify that the fore kruptcy proceedin		complete statement o	of any agreement of	or arrangement for	or payment to me for	r representation of	of the debtor(s) in
	Janı	uary 19, 2016			/s	s/ Christina Ba	inyon		
Date		C	hristina Banyo	on					
						ignature of Attor Banyon & Sche			
					30	077 West Jeffe Suite 107			

Joliet, IL 60435

Name of law firm

cbanyon.law@gmail.com

### **United States Bankruptcy Court** Northern District of Illinois

In re	Kelley Michelle Partak		Case No.			
		Debtor(s)	Chapter	7		
	VE	RIFICATION OF CREDITOR MA	ATRIX			
		Number of Creditors: 32				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Date:	January 19, 2016	/s/ Kelley Michelle Partak  Kelley Michelle Partak  Signature of Debtor				

Allied Interstate PO Box 4000 Warrenton, VA 20188

Bank of America PO Box 982238 El Paso, TX 79998

Bills Heating and Air Conditioning 101 Vine Street Wilmington, IL 60481

Capital One Bank PO Box 6492 Carol Stream, IL 60197

Cary Ann Jenkins, MD 1499 Lakewood Drive, Unit A Morris, IL 60450

Chase PO Box 15548 Wilmington, DE 19886

Chase Receivables 1247 Broadway Sonoma, CA 95476

CitiCards Processing Center Des Moines, IA 50363

Creditors Discount & Audit 415 East Main Street PO Box 213 Streator, IL 61364

Digestive Health Associates 1100 Houbolt Road Joliet, IL 60431

Dr. Douglas Halkyard 110 East Jackson Street Morris, IL 60450 Financial Plus 800 Chesnut Street Ottawa, IL 61350

Grundy Bank PO Box 520 Morris, IL 60450

Grundy County Collector PO Box 689 Morris, IL 60450

Grundy Radiologists PO Box 3273 Indianapolis, IN 46206

Healthcare Centers of Morris Hospit 25259 Reed Street Channahon, IL 60410

Illinois Valley Surgical Associates 1050 East Norris Drive Ottawa, IL 61350

Jennifer Jones, MD 1499 Lakewood Drive Unit C Morris, IL 60450

John Bolden Junior, MD 10600 West 143rd Street Suite B Orland Park, IL 60462

LTD Financial Services 7322 Southwest Freeway Suite 1600 Houston, TX 77074

Meyer & Njus, P.A. 33 N. Dearborn Street Suite 1301 Chicago, IL 60602 Michelle Partak 1045 East First Street Coal City, IL 60416

MiraMed Revenue Group Dept. 77304 Detroit, MI 48277

Morris Hospital Business Office 150 West Street Morris, IL 60450

MRS Associates of New Jersey 1930 Olney Ave Cherry Hill, NJ 08003

Murphy Lamon & Associates 2860 River Road Suite 200 Des Plaines, IL 60018

New York and Company PO Box 659728 San Antonio, TX 78265

PRCL Letter Service PO Box #1 Morris, IL 60450

Sherwin Ritz MD 35 East Willow Street Coal City, IL 60416

Southwest Rapid Rewards PO Box 15153 Wilmington, DE 19886

TJ Max Rewards PO Box 530949 Atlanta, GA 30353

Victorias Secret PO Box 659728 San Antonio, TX 78265